

ECS Configuration Change Request

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CCR No.	96-1460	Logged Date	12/24/96	Rev.	-	Request Type	CCR
Priority	Routine <input type="checkbox"/>	Urgent <input type="checkbox"/>	Emergency <input checked="" type="checkbox"/>	Affected Release		Change Class II	
Title (description) Purchase 3 Sun Ultras to support Release Development Design and Documentation							
Documents Affected				Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference			
N/A				N/A			
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>							
Problem Release Development requires 3 Sun Ultras to support evolutionary design using the Rational suite of tools. These machines are required to provide capability for an additional 30 users per machine.							
Proposed Solution Purchase 3 Sun Ultra's of the following configuration: Sun Ultra 2 configured with Dual 200 MHz processors, 1024 MB RAM, 3 GB swap, 2 GB disk for Operating System and Rational Tools, 9 GB drive for ROSE models (this needs to be a single drive), FDDI interface, high speed SCSI controller. Approval of this purchase has already been granted by Mike Demcsak.							
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input type="checkbox"/> QA <input type="checkbox"/> Rel. A <input type="checkbox"/> Rel. B <input checked="" type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input type="checkbox"/> SMO <input type="checkbox"/> Subconts <input type="checkbox"/> A.1 <input type="checkbox"/> Other _____ Cost: None <input type="checkbox"/> Small <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____							
Originator <u>Vincent J. Harris</u> _____ Signature _____ Date _____ Office _____ Office Manager _____ Signature _____ Date _____							
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments: CCB Chairperson _____ Signature _____ Date _____							